

<b>TRANSMITTAL SLIP</b>		DATE <b>10 December 1957</b>
TO: <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>		
ROOM NO.	<b>Matomic</b>	
REMARKS:  <p style="text-align: center;"><b>Please advise this office when and if the attached request is approved.</b></p>  <p><b>(Att: TCS-2396-57 cys 2 and 3)</b></p>		
FROM: <b>James Q. Reber</b>		
ROOM NO.	BUILDING	EXTENSION
<b>305</b>	<b>Admin</b>	<span style="border: 1px solid black; display: inline-block; width: 30px; height: 1.2em; vertical-align: middle;"></span>

FORM NO. 241  
1 FEB 55

REPLACES FORM 36-8  
WHICH MAY BE USED.

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